PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number 518768288

Effective October 1, 2001									1016	<i>-</i>	<i></i>	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14				RAT	Ε	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA	BASIC	FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			/ 4 minus 20=		· Ø		X\$ 9	9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* /		X42	:=	42	OR	X84=	
MU	LTIPLE DEPENI	DENT CLAIM PI	RESENT				+140)=	·	OR	+280=	
* If	the difference	in column 1 is	less than ze	TOT	AL	412	OR	TOTAL				
CLAIMS AS AMENDED - PART II											OTHER	
_	(Column 1) (Column 2) (Column 3							LL	NTITY	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT	<u>:</u>	NUM PREVI	MBER OUSLY FOR	R PRESENT SLY EXTRA		Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9=) =		OR	X\$18=	
	Independent	*	Minus	***			X42	=		OR	X84=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)=		OR	+280=	
								TAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	ADDIT.	FEE	<u></u>		ADDIT. FEE	
MENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***	=	=	X42	2=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0=		OR	+280=	
BEST AVAILABLE COPY							T(ADDIT.	OTAL FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	umn 2)	(Column 3)						
AMENDMENT C	THE TOTAL STATE	CLAIMS REMAINING AFTER AMENDMENT		NU: PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE
	Total	*	Minus	**		-	X\$	9=		OR	X\$18=	
	Independent	*	Minus	***		=	X4:	2=		OR	V04	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL						J		 	1		1
	If the entry in colu	ımn 1 is less than	the entry in colu	ımn 2. wr	rite "0" in c	olumn 3.	+14			OR	TOTAL	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												